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## AMENDMENTS TO THE CLAUV |

(Currently amended) A method of preventing paiss at oil embt it c material from a 1. left atrial appendage of a patient, comprising:

providing a deployment catheter having an elongat | l'exible !: idy with a proximal end and a distal end, and an implantable device removable and its ied by the distal end, said device comprising a barrier, said device radially expands as from a reduced diameter to an enlarged diameter and configured to conform to an wedge surface of the left atrial appendage;

positioning at least a portion of the device in the least appropriate and enlarging the device within the left atrial appendant, wherein said barrier extends across the left atrial appendage when enlarged and so that is least a present of the device circumferentially seals against is in substantial sealing on the with the inside surface of the left atrial appendage.

- (Original) The method of Claim 1, wherein the c.ev is solf-en ands to its enlarged 2. shape.
- (Original) The method of Claim 1, wherein the devia include; an expandable 3. frame.
- (Original) The method of Claim 3, wherein the devan includes a mesh barrier 4. operably connected to the expandable frame.
- (Original) The method of Claim 1, further compris as volcasa is the device from 5. the deployment catheter after the device is enlarged within the ef strict appointage.
  - 6.-37. (Canceled)
- (Original) A method of preventing passage of emb | | | naterial 38. appendage of a patient, comprising:

positioning a barrier adjacent an opening of the lef a mid app mdage; and engaging at least one anchoring element with the ue within the left atrial appendage, the at least one anchoring element being ope at very connected to the barrier to hold the barrier adjacent the opening and prevent passe at or embalic material from the left atrial appendage.

10/674,553

From-KNOBBE MARTENS OLSON BEAR

Filed

September 30, 2003

- (Original) The method of Claim 38, wherein the batier is a much. 39.
- (Original) The method of Claim 38, wherein the batis is portus. 40.
- (Original) The method of Claim 40, wherein the batis is a ore size of up to 41. about 0.04 inches.
  - (Original) The method of Claim 40, wherein the be it as man of ePTFE. 42.
  - (Original) The method of Claim 38, wherein the beginning as generally a disc shape. 43.
- (Original) The method of Claim 38, wherein the be in complises an inflatable 44. balloon.
- (Original) The method of Claim 38, wherein the begins is connected to an 45. expandable frame.
- (Previously presented) The method of Claim 38, we see the stream one 46. anchoring element extends at least partially transversely toward a small end of the left atrial appendage.
- (Previously presented) The method of Claim 38, wo sacin the at least one 47. anchoring element engages tissue at the distal end of the left anial apprintage
- (Previously presented) The method of Claim 38, we are in a pleaslity of anchoring elements engage tissue along the side walls of the left atrial apr en angle
- (Original) The method of Claim 38, further compairing delivering the barrier to 49. the left atrial appendage with a catheter.
- (Previously presented) The method of Claim 1, who wint the divice at least 50. partially prevents passage of embolic material from the left atrial and age by supporting tissue growth.
  - 51.-54. (Canceled)
- (Previously presented) The method of Claim 38 was ean the evice at least 55. partially prevents passage of embolic material from the left atrial endage by supporting tissue growth.
- (Previously presented) A method of preventing 221 and of empolic material from 56. an atrial appendage of a patient, comprising positioning a device: has int an opening of the atrial appendage to block the opening to the atrial appendage, wherein 1 and ating assage of embolic material from the atrial appendage occurs substantially entirely as a result of said positioning, and

10/674,553

Filed

03-Jan-2007 16:48

September 30, 2003

engaging at least one anchoring element with tissue within the stri : chenda e to hold the device in place.

- (Previously presented) The method of Claim 56. w are in the evice is delivered 57. percutaneously.
- (Previously presented) The method of Claim 56 w a ein the evice is positioned 58. within the atrial appendage.
- (Previously presented) The method of Claim 56 w win the wice comprises an 59. expandable frame.
- (Previously presented) The method of Claim 56 was tin the sevice comprises a 60. membrane sized to block the opening.
- (Previously presented) The method of Claim 60, we thin the membrane is 61. porous.
  - 62. (Canceled)
- (Previously presented) The method of Claim 56, volume in the levice has generally 63. a disc shape.
- (Previously presented) The method of Claim 56, we main the evice at least 64. partially blocks passage of embolic material from the atrial appen the by supporting tissue growth.
  - 65. (Canceled)
- (Previously presented) The method of Claim 56, c pr prising, prior to positioning 66. said device:

delivering a trans-septal catheter into the right a riv at

advancing a distal tip of the trans-septal catheter thought a decired portion of the septum and to the left atrial appendage, wherein the transthe distal tip of the trans-septal catheter toward the left atr Ampendage; and

delivering said device through the trans-septal cath that and de sloying the device at the left atrial appendage, the device being configured to append person person of embolic material from the left atrial appendage.

(Previously presented) The method of Claim 60, 1 runtr commissing delivering a 67. delivery catheter through the trans-septal catheter to deliver said or soid a

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03-Jan-2007 16:48

Appl. No.

10/674,553

Filed

September 30, 2003

- 68. (Previously presented) The method of Claim 67 watern a detail end of the delivery catheter is disposed within an opening of the left atrial up in Cage.
- 69. (Previously presented) The method of Claim 66 was ein the sevice is deployed by expanding said device.
- 70. (Previously presented) The method of Claim 66 it it is comparising applying an axial force to said device to deploy said device.
- 71. (Previously presented) The method of Claim 70 wherein the scial force is applied by a plunger slidably received within a delivery catheter, the delivery catheter extending through the trans-septal catheter to the left atrial appendage.

72.-84. (Canceled)

85. (Currently amended) A method of performing a are sulture at a strial appendage of a patient, comprising:

collapsing an implantable structure to a reduced co-figuration

enlarging the implantable structure adjacent an our ing of the atrial appendage; and

placing at least a portion of the implantable structure is substituted circumferential sealing contact with a tissue surface adjacent the opening of the atrial appendage.

- 86. (Previously presented) The method of Claim 85, we will in the innoture is collapsed into a catheter.
- 87. (Previously presented) The method of Claim 86. we see a the tructure is collapsed into a catheter outside the body.
- 88. (Previously presented) The method of Claim 87 w we sin the tructure is enlarged after said collapsing.
- 89. (Previously presented) The method of Claim 85 w in each the tructure is enlarged at least partially within the atrial appendage.
- 90. (Previously presented) The method of Claim 85 when the tructure when enlarged prevents passage of embolic material from the atrial application.
- 91. (Previously presented) The method of Claim 85 was a in the implantable structure comprises a surface that induces tissue growth.

92.-119. (Canceled)

10/674,553

Filed

September 30, 2003

120. (New) A method of preventing passage of embs is states. I from a left atrial appendage of a patient, comprising:

providing an implantable device having a protincil end, a distal end, a longitudinal axis extending from the proximal end to the distal end, and a barrier, the implantable device having a collapsed configuration and a despended configuration;

positioning the implantable device in the left at it is prendag, while the device is in its collapsed configuration; and

enlarging the implantable device in the left atrial postudage wherein the barrier extends across the longitudinal axis when the implantable arrive is en larged.

- partially self-expanding, and is restrained from expansion and position d in the left atrial appendage.
- 122. (New) The method of Claim 121, wherein enlarging the implintable device in the left atrial appendage comprises releasing the implantable device from a deployment catheter.
- 123. (New) The method of Claim 122, wherein the inputatible device is positioned in an inner lumen of the deployment catheter, and releasing the implantable device from the deployment catheter comprises axially moving the implantable device out of the inner lumen of the deployment catheter.
- 124. (New) The method of Claim 122, wherein releasing the implantable device from the deployment catheter comprises detaching the implantable device from a distal end of the deployment catheter.
- 125. (New) The method of Claim 120, wherein the ir martable levice comprises an expandable frame.
- 126. (New) The method of Claim 125, further compare to the expandable frame.
- passage of embolic material from the left atrial appendage by sup ording tiss to growth.
- 128. (New) A method of preventing passage of each its materal from a left atrial appendage of a patient, comprising:

10/674,553

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September 30, 2003

advancing a catheter having a proximal end an lead still end through the patient until the distal end is disposed adjacent the opening of the patient's left atrial appendage; and

releasing a device from the distal end of the cat was to de doy the device, the device configured to block an opening to the left atrial appendage appendage of embolic material from the left atrial appendage.

- 129. (New) The method of Claim 128, wherein the days are positioned within an inner lumen of the catheter, and releasing the device comprises applying as in a distal direction to the device to deploy it.
- 130. (New) The method of Claim 128, wherein releasing the device from the catheter comprises detaching the device from the distal end of catheter.
- 131. (New) The method of Claim 128, wherein the datase comprises an expandable frame.
- 132. (New) The method of Claim 131, further comprise the mest operably connected to the expandable frame.
- 133. (New) The method of Claim 128, wherein the doing at less partially prevents passage of embolic material from the left atrial appendage by supporting tiss to growth.
- appendage of a patient, comprising positioning a device in the least appendage and securing the device relative to the left atrial appendage, the device so liquid to prevent passage of emboli from the left atrial appendage, wherein the device conform to an inside wall of the left atrial appendage when positioned therein.
  - 135. (New) The method of Claim 134, wherein the davi and mprices a mesh barrier.
- 136. (New) The method of Claim 134, wherein the decrease correctises an expandable frame.
- 137. (New) The method of Claim 134, wherein the de as is delighted percutaneously into the patient.
- 138. (New) The method of Claim 134, wherein the cover engages walls of the left atrial appendage.

10/674,553

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September 30, 2003

- 139. (New) The method of Claim 134, wherein the do is at less partially prevents passage of embolic material from the left atrial appendage by st pt a ung tissue growth.
- 140. (New) A method of preventing passage of enals in a left atrial appendage of a patient, comprising:

percutaneously delivering an implantable device to heleft at all appendage; securing the implantable device relative to the left and appendage; and

preventing passage of embolic material from the all atrial appendage with the implantable device, wherein said preventing passage of artbolic material comprises providing a barrier carried by the implantable device acros the left at ial appendage.

- 141. (New) The method of Claim 140, wherein the davi : s leliv: and using a catheter.
- 142. (New) The method of Claim 141, wherein the double comprises an expandable frame.
- 143. (New) The method of Claim 142, wherein the decrease a mesh operably connected to the expandable frame.
- 144. (New) The method of Claim 140, wherein the double at least partially prevents passage of embolic material from the left atrial appendage by supporting tiss to growth.
- 145. (New) A method of performing a procedure at a unital appendage of a patient, comprising:

positioning an implantable structure adjacent the continuous herein appendage, the structure having a reduced configuration and an enda god configuration, wherein the structure is in a reduced configuration while being positioned and therein the structure conforms to an inner wall tissue surface when enlarged

- 146. (New) The method of Claim 145, further comp is a callarge g the structure to its enlarged configuration at the atrial appendage.
- 147. (New) The method of Claim 146, further comp is the cularge g the structure to its enlarged configuration at least partially within the atrial appendix.
- 148. (New) The method of Claim 145, further comparing altering a position of the structure within the atrial appendage while the structure is being 1 with ned.

10/674,553

Filed

September 30, 2003

- 149. (New) The method of Claim 148, wherein al riog the position comprises releasing the implantable structure from a delivery device to initially position the structure at the atrial appendage.
- 150. (New) The method of Claim 145, wherein position in the implantable structure at the atrial appendage comprises an initial positioning of the structure in the atrial appendage.
- 151. (New) The method of Claim 145, wherein the miplantiale structure when positioned prevents the passage of embolic material from the atria inpendage.
- 152. (New) The method of Claim 145, wherein the mannable structure comprises a surface that induces tissue growth.
- 153. (New) A method of performing a procedure at as a rial appendage of a patient, comprising:

providing an implantable structure positioned adjuster, the pening of the atrial appendage, the structure having a reduced configuration and in the enlarged configuration blocking the opening of the strice appendage; and

changing the configuration of the structure at the avail appendage.

- 154. (New) The method of Claim 153, wherein case play the onfiguration of the structure comprises enlarging the structure.
- 155. (New) The method of Claim 154, wherein the stature when enlarged prevents passage of embolic material from the atrial appendage.
- 156. (New) The method of Claim 153, wherein the standard charges its configuration at least partially within the atrial appendage.
- 157. (New) The method of Claim 153, wherein the irr include: ructure comprises a surface that induces tissue growth.
- 158. (New) A method of performing a procedure as a smial appendage of a patient, comprising:

deploying an implantable structure at the atrial at a sidage u this delivery device positioned at the atrial appendage, the structure being so  $\frac{1}{2}$  at the block an opening of the atrial appendage; and

removing the delivery device from its position at the strial appendage.

159. (New) The method of Claim 158, wherein the deligity device is a catheter.

10/674,553

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Filed

September 30, 2003

- 160. (New) The method of Claim 158, wherein the delivery levice is delivered percutaneously.
- 161. (New) The method of Claim 158, further compring the changing a position of an implantable structure at the atrial appendage, the structure having a position and an enlarged configuration.
- 162. (New) The method of Claim 161, further comprise the configuration of the structure at the atrial appendage.
- 163. (New) The method of Claim 162, wherein the con it unation is changed from the reduced configuration to the enlarged configuration.
- 164. (New) The method of Claim 158, wherein the do incry device is removed after deploying the implantable structure at the atrial appendage.
- 165. (New) The method of Claim 158, wherein the deli say levice as removed without the implantable structure.
- 166. (New) The method of Claim 158, wherein the do it ery decree is removed after positioning the implantable structure at the atrial appendage.
- 167. (New) The method of Claim 158, wherein the deli my device is removed after an initial positioning of the implantable structure at the atrial append in the structure at the atrial append.
- 168. (New) The method of Claim 158, further compr size temovia general device from the patient.
- 169. (New) The method of Claim 158, wherein the deli any levice is positioned within the atrial appendage.
- 170. (New) A method of preventing passage of ea noles ma brial from an atrial appendage, the method comprising:

delivering a device to the atrial appendage; and

positioning the device at the atrial appendage, the kivi ze when positioned having at least a portion that generally conforms to an inside such the prial appendage.

- 171. (New) The method of Claim 170, wherein no toming the device comprises expanding the device into contact with an inside surface of the an ill supend ge.
- 172. (New) The method of Claim 170, wherein the de it e complises a frame with an outer rim that generally conforms to an inside surface of the atrial in pendage

10/674,553

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Filed

September 30, 2003

- 173. (New) The method of Claim 170, wherein the development positioned comprises a frame that generally conforms to an inside surface of the atria appropriate.
- 174. (New) The method of Claim 173, wherein the comprises a plurality of linked elements.
  - 175. (New) The method of Claim 173, wherein the fian as generally cylindrical.
- 176. (New) The method of Claim 170, wherein 10s torang the device comprises positioning a barrier across the atrial appendage.
- 177. (New) The method of Claim 170, wherein the contact is a livered through the normal opening of the atrial appendage.
- 178. (New) The method of Claim 170, wherein ends is material is prevented from passage from the atrial appendage substantially entirely by position  $n_0$ ; of the device at the atrial appendage.
- 179. (New) The method of Claim 1, wherein said orders seat off the left atrial appendage when expanded.
- 180. (New) The method of Claim 85, wherein the impartable a nature seals off the atrial appendage when enlarged.

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